

County: Racine
LINCOLN LUTHERAN CARE CENTER
1600 OHIO STREET

Facility ID: 9410

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RACINE 53405 Phone: (262) 637-7491
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/01): 264
Total Licensed Bed Capacity (12/31/01): 305
Number of Residents on 12/31/01: 204

Ownership:
Highest Level License:
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 226

Nonprofit Church/Corporation
Skilled
No
Yes
Yes
226

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		24.5
Supp. Home Care-Personal Care	No					1 - 4 Years		55.9
Supp. Home Care-Household Services	No	Developmental Disabilities	2.9	Under 65	7.8	More Than 4 Years		19.6
Day Services	No	Mental Illness (Org./Psy)	42.6	65 - 74	10.3			-----
Respite Care	No	Mental Illness (Other)	2.5	75 - 84	36.8			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	38.7	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.0	95 & Over	6.4	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.5		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	1.0		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	18.6	65 & Over	92.2	-----		
Transportation	No	Cerebrovascular	6.9		-----	RNs		5.8
Referral Service	No	Diabetes	9.8	Sex	%	LPNs		5.4
Other Services	No	Respiratory	2.0		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	12.3	Male	27.9	Aides, & Orderlies		
Mentally Ill	No		-----	Female	72.1			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care			Managed Care			Total Resi - dents	% Of All	
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)
Int. Skilled Care	0	0.0	0	9	5.2	128	0	0.0	0	2	7.7	188	0	0.0	0	0	0.0	0	11	5.4
Skilled Care	6	100.0	239	146	84.9	109	0	0.0	0	24	92.3	160	0	0.0	0	0	0.0	0	176	86.3
Intermediate	---	---	---	11	6.4	91	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	11	5.4
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	6	3.5	109	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	6	2.9
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	6	100.0		172	100.0		0	0.0		26	100.0		0	0.0		0	0.0		204	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				

Percent Admissions from		Activities of	%	% Needing Assistance of	% Totally Dependent	Total Number of Residents
Private Home/No Home Health	6.2	Daily Living (ADL)	Independent	One Or Two Staff		
Private Home/With Home Health	3.9	Bathing	2.5	50.5	47.1	204
Other Nursing Homes	5.6	Dressing	2.5	50.5	47.1	204
Acute Care Hospitals	78.7	Transferring	5.9	50.5	43.6	204
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	5.9	50.0	44.1	204
Rehabilitation Hospitals	1.7	Eating	42.2	17.6	40.2	204
Other Locations	3.9	*****				
Total Number of Admissions	178	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	5.4	Receiving Respiratory Care		4.9
Private Home/No Home Health	14.4	Occ/Freq. Incontinent of Bladder	45.1	Receiving Tracheostomy Care		0.5
Private Home/With Home Health	8.7	Occ/Freq. Incontinent of Bowel	38.2	Receiving Suctioning		0.5
Other Nursing Homes	5.3			Receiving Ostomy Care		1.5
Acute Care Hospitals	18.3	Mobility		Receiving Tube Feeding		4.4
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	6.4	Receiving Mechanically Altered Diets		36.8
Rehabilitation Hospitals	0.5					
Other Locations	7.7	Skin Care		Other Resident Characteristics		
Deaths	45.2	With Pressure Sores	6.9	Have Advance Directives		89.2
Total Number of Discharges		With Rashes	1.0	Medications		
(Including Deaths)	208			Receiving Psychoactive Drugs		24.0

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Nonprofit Peer Group Ratio %	Bed Size: 200+ Peer Group Ratio %	Licensure: Skilled Peer Group Ratio %	All Facilities %				
Occupancy Rate: Average Daily Census/Licensed Beds	74.1	89.4	0.83	84.7	0.88	84.3	0.88	84.6	0.88
Current Residents from In-County	92.2	82.7	1.11	82.2	1.12	82.7	1.11	77.0	1.20
Admissions from In-County, Still Residing	24.2	25.4	0.95	22.3	1.08	21.6	1.12	20.8	1.16
Admissions/Average Daily Census	78.8	117.0	0.67	89.0	0.88	137.9	0.57	128.9	0.61
Discharges/Average Daily Census	92.0	116.8	0.79	93.1	0.99	139.0	0.66	130.0	0.71
Discharges To Private Residence/Average Daily Census	21.2	42.1	0.50	37.0	0.57	55.2	0.38	52.8	0.40
Residents Receiving Skilled Care	91.7	93.4	0.98	89.9	1.02	91.8	1.00	85.3	1.07
Residents Aged 65 and Older	92.2	96.2	0.96	87.3	1.06	92.5	1.00	87.5	1.05
Title 19 (Medicaid) Funded Residents	84.3	57.0	1.48	73.2	1.15	64.3	1.31	68.7	1.23
Private Pay Funded Residents	12.7	35.6	0.36	19.8	0.64	25.6	0.50	22.0	0.58
Developmentally Disabled Residents	2.9	0.6	4.70	2.4	1.25	1.2	2.50	7.6	0.39
Mentally Ill Residents	45.1	37.4	1.21	42.5	1.06	37.4	1.21	33.8	1.33
General Medical Service Residents	12.3	21.4	0.57	25.0	0.49	21.2	0.58	19.4	0.63
Impaired ADL (Mean)	66.5	51.7	1.29	51.7	1.28	49.6	1.34	49.3	1.35
Psychological Problems	24.0	52.8	0.45	59.8	0.40	54.1	0.44	51.9	0.46
Nursing Care Required (Mean)	7.0	6.4	1.10	7.3	0.96	6.5	1.08	7.3	0.96